

Revision: HCFA-AT-81-34 (BPP)

81-19  
**OFFICIAL**

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State RHODE ISLANDCitation42 CFR 447.10(c)  
AT-78-90  
46 FR 426994.21 Prohibition Against Reassignment of  
Provider Claims

Payment for Medicaid services  
furnished by any provider under this  
plan is made only in accordance with  
the requirements of 42 CFR 447.10.

TN #

Supersedes

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